**WHO's response to OHCHR request on existing procedures on the participation of Indigenous Peoples at the United Nations**

WHO takes this opportunity to share information on existing procedures regarding the participation of Indigenous Peoples in the work of WHO, including good practices and current gaps.

***Existing procedures***

Since its establishment, the World Health Organization (WHO) has collaborated with a broad range of stakeholders, covering all areas of WHO's work.

Indigenous Peoples' participation and engagement with WHO are governed by the WHO Constitution, resolutions and decisions of the World Health Assembly, and takes place in accordance with WHO’s policies and rules, including the [WHO's Framework for Engagement with Non-State Actors](https://www.who.int/about/collaboration/non-state-actors) (FENSA)[[1]](#footnote-2).

In 2023, WHO established the **WHO Civil Society Commission (CSO)**[[2]](#footnote-3), with the aim of facilitating regular dialogue with civil society, hosted by the WHO Director-General (DG). The CSO’s mandate includes establishing dedicated thematic and/or geographical/regional focus working groups, as well as developing collaborative agreements with individual non-governmental and civil society organizations.

WHO dialogues between the General Director and civil society organizations[[3]](#footnote-4) are convened to discuss concrete joint proposals and solutions, and to strengthen relations between WHO and civil society organizations[[4]](#footnote-5). All civil society organizations, including Indigenous Peoples' organizations, working on health-related issues that meet the criteria outlined in the Terms of Reference of the CSO Commission, are welcomed to join[[5]](#footnote-6).

Individuals from Indigenous communities and Indigenous Peoples’ organizations participate in WHO activities, including meetings, capacity-building activities, webinars, and consultative processes for the development of policies and strategies, among others. Indigenous Peoples engage and contribute as peer reviewers, independent experts, and speakers in WHO-led processes and events. As part of internal procedures, WHO requires that experts serving in an advisory role disclose any circumstances that could give rise to actual or ostensible conflict of interest.[[6]](#footnote-7)

In relation to the selection criteria of Indigenous individuals to participate in global WHO processes, WHO headquarters fosters the participation of Indigenous Peoples in coordination with its regional offices and country offices. In the Region of the Americas, there is ongoing collaboration with key Indigenous Organizations.

WHO also regularly seeks advice from the UN Permanent Forum on Indigenous Issues, the Expert Mechanism on the Rights of Indigenous Peoples, and the Special Rapporteur on the Rights of Indigenous Peoples to identify Indigenous experts to provide inputs to WHO’s work on specific health related issues, ensuring geographical representation, gender balance and a life course approach.

***Good practices***

WHO promotes Indigenous Peoples in multiple spaces, in different programmes or initiatives that are related to health. Examples on this include in addressing the Triple Planetary Crisis—intersecting biodiversity loss, climate change, and pollution—and promoting their participation in global UN processes, such as Conferences of the Parties to the Convention on Biological Diversity and the UN Framework Convention on Climate Change. Additional examples include seeking Indigenous Peoples' perspectives to inform the development of the Traditional Medicine Strategy 2025–2034[[7]](#footnote-8) and the WHO World Report on Social Determinants of Health Equity[[8]](#footnote-9).

In 2023, the 76th World Health Assembly (WHA) adopted [Resolution 76.16 on the Health of Indigenous Peoples[[9]](#footnote-10),](https://apps.who.int/gb/ebwha/pdf_files/WHA76/A76_R16-en.pdf) marking the first time the WHA passed a resolution addressing the health disparities that Indigenous Peoples face worldwide. This Resolution calls on Member States and other relevant actors to take action on the health of Indigenous Peoples, in consultation with Indigenous Peoples themselves, with their free, prior and informed consent. In particular, the Resolution calls the WHO Director-General to develop a Global Plan of Action for the Health of Indigenous Peoples (GPA) for the consideration of the WHA in 2026[[10]](#footnote-11).

As a first step for the development of the GPA, WHO has initiated the development of a situation analysis on the health of Indigenous Peoples. In this process, WHO has ensured the participation of Indigenous experts from the seven socio-cultural regions, who have contributed to the design of the research plan. Additional consultations in person and in virtual format are planned to ensure Indigenous Peoples participation throughout the process.

***Existing gaps and challenges***

Non-state actors, (including nongovernmental organizations, international business associations, and philanthropic foundations) may establish "official relations" with WHO.[[11]](#footnote-12) Only organizations in official relations with WHO are eligible to attend governing body meetings. At the time of responding to this request, the WHO Secretariat does not track information on which organizations in official relations with WHO have Indigenous organizations as part of their membership.

There are also regional variations to WHO’s engagement with Indigenous Peoples. While WHO is working to advance Indigenous Peoples’ participation across all regions, some regions have more established processes for ensuring the participation of Indigenous Peoples, with the Region of the Americas being a particularly good example.

1. WHO Resolution WHA69.10, Framework of engagement with non-State actors, <https://apps.who.int/gb/ebwha/pdf_files/wha69/a69_r10-en.pdf> [↑](#footnote-ref-2)
2. WHO Civil Society Commission, available here: <https://www.who.int/about/collaboration/civil-society-and-ngo-engagement/civil-society-commission> [↑](#footnote-ref-3)
3. CSC-WHODG Dialogues <https://www.who.int/about/collaboration/civil-society-and-ngo-engagement/cso-who-dg-dialogues> [↑](#footnote-ref-4)
4. For instance, in June 2023, the CSO and the WHO Director- General discussed priorities on traditional, complementary and integrative medicine, in the lead up to the WHO Traditional Medicine Global Summit on 17 and 18 August 2023 in Gandhinagar, Gujarat, India. More information is available here: <https://www.who.int/news/item/10-07-2023-who-director-general-discusses-priorities-on-traditional--complementary-and-integrative-healthcare-with-civil-society> [↑](#footnote-ref-5)
5. Terms of Reference of WHO Civil Society Commission, section VII. Participation in the WHO Civil Society Commission, available here <https://cdn.who.int/media/docs/default-source/documents/about-us/collaborations/civil-society/terms-of-reference-who-cso-commission.pdf?sfvrsn=3f1f4027_3> [↑](#footnote-ref-6)
6. WHO, Declaration of Interest, more information is available here: <https://www.who.int/about/ethics/declarations-of-interest> [↑](#footnote-ref-7)
7. WHO, Call for consultation: Draft Traditional Medicine Strategy 2025–2034, available at: <https://www.who.int/news-room/articles-detail/call-for-consultation--draft-traditional-medicine-strategy-2025-2034> [↑](#footnote-ref-8)
8. WHO, Indigenous Peoples and tackling health inequities: WHO side event at the 21st session of the UN Permanent Forum on Indigenous Issues [https://www.who.int/news-room/events/detail/2022/05/03/default-calendar/indigenous-peoples-and-tackling-health-inequities--who-side-event-at-the-2022-session-of-the-un-permanent-forum-on-indigenous-issues. Additional examples include Indigenous Peoples’ participation at the first](https://www.who.int/news-room/events/detail/2022/05/03/default-calendar/indigenous-peoples-and-tackling-health-inequities--who-side-event-at-the-2022-session-of-the-un-permanent-forum-on-indigenous-issues.) WHO Traditional Medicine Global Summit, entitled "Towards health and well-being for all”. The outcome of the summit was marked by the Gujarat Declaration, available at the following link: [https://cdn.who.int/media/docs/default-source/integrated-health-services-(ihs)/tci/summit2023/tm-summit-website---about-the-summit.pdf?sfvrsn=17c61ba9\_2](https://cdn.who.int/media/docs/default-source/integrated-health-services-%28ihs%29/tci/summit2023/tm-summit-website---about-the-summit.pdf?sfvrsn=17c61ba9_2) [↑](#footnote-ref-9)
9. WHO, The Health of Indigenous Peoples, Resolution 76.16, available at: <https://apps.who.int/gb/ebwha/pdf_files/WHA76/A76_R16-en.pdf> [↑](#footnote-ref-10)
10. WHO, Global Plan of Action for the Health of Indigenous Peoples, WHO Initiative page available here: <https://www.who.int/initiatives/global-plan-of-action-for-health-of-indigenous-peoples> [↑](#footnote-ref-11)
11. WHO Resolution WHA69.10, Framework of engagement with non-State actors, <https://apps.who.int/gb/ebwha/pdf_files/wha69/a69_r10-en.pdf> [↑](#footnote-ref-12)